

JC20 Rec'd PCT/PTO 01 AUG 2005

**Application Data Sheet****Application Information**

Application number::

Filing Date::

Application Type::

Regular

Subject Matter::

Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R??::

Number of CD disks::

Number of copies of CDs::

Sequence Submission::

Computer Readable Form (CRF)?::

Number of copies of CRF::

Title::

Active Immunization to Generate Antibodies to  
Soluble A-Beta

Attorney Docket Number::

15270J-009820US

Request for Early Publication::

No

Request for Non-Publication::

No

Suggested Drawing Figure::

Total Drawing Sheets::

Small Entity?::

No

Latin name::

Variety denomination name::

Petition included?::

No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers One::

Secrecy Order in Parent Appl.::

No

### Applicant Information

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity

1-00

Given Name:: Ted

Middle Name::

Family Name:: Yednock

Name Suffix::

City of Residence:: Forest Knolls CA

State or Province of Residence:: CA

Country of Residence:: US

Street of Mailing Address:: 184 Arroyo Road

City of Mailing Address:: Forest Knolls

State or Province of mailing address:: CA

Country of mailing address:: US

Postal or Zip Code of mailing address:: 94933

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity

2-00

Given Name:: Nicki

Middle Name::

Family Name:: Vasquez

Name Suffix::

City of Residence:: San Francisco CA

State or Province of Residence:: CA

Country of Residence:: US

Street of Mailing Address:: 310 Sanchez Street

City of Mailing Address:: San Francisco

State or Province of mailing address:: CA

Country of mailing address:: US  
Postal or Zip Code of mailing address:: 94114

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: FR ✓  
Status:: Full Capacity

300 Given Name:: Frederique  
Middle Name::  
Family Name:: Bard  
Name Suffix::

City of Residence:: Pacifica CA  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of Mailing Address:: 1111 Park Pacifica Avenue  
City of Mailing Address:: Pacifica  
State or Province of mailing address:: CA  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 94044

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity

400 Given Name:: Peter  
Middle Name:: A.  
Family Name:: Seubert  
Name Suffix::

City of Residence:: South San Francisco CA  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of Mailing Address:: 222 Northwood Drive  
City of Mailing Address:: South San Francisco

State or Province of mailing address:: CA  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 94080

**Correspondence Information**

Correspondence Customer Number:: 20350

**Representative Information**

Representative Customer Number:: 20350

**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Date::
This Application	National Stage of	PCT/US2004/002865	01/31/2004
PCT/U2004/002865	Application claiming	60/444,150	02/012003
	benefit under 35 USC		
	119(e)		
This Application	Continuation of	10/771,174	02/02/2004